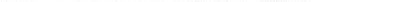


*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Substitute for form 1449/PTO (Revised 04/2003)		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT			
(Use as many sheets as necessary)			
Sheet	2	of	2
		Attorney Docket Number	
		047347.260967	

OTHER DOCUMENTS

Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s) , volume-issue number(s), publisher, city and/or country where published.	English Language Translation Attached
DA	5	International Search Report from corresponding International Application No. PCT/EP 02/08148 dated November 7, 2002.	

Examiner Signature		Date Considered	7/19/06
-----------------------	---	--------------------	---------

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.